

UNITED STATES BANKRUPTCY COURT
DISTRICT OF IDAHO (TWIN FALLS)
PROOF OF CLAIM
 U.S. Bankruptcy Court
 District of Idaho
 Twin Falls
 Case No. 03-41318
 Date Filed 07/11/03
 Clerk of Court
 2154782

 Name of Debtor
 Lynn Ketterling
 Jeanne Ketterling

 Case Number
 03-41318 **12**

This form is used to make a claim for an administrative expense arising out of the bankruptcy case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

 Name of Creditor (The person or other entity to whom the debtor owes money or property):
 Nick's Quality Tire

Name and Address where notices should be sent:

 Nick's Quality Tire
 Hwy 24
 Rupert, ID 83350

- ☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
- ☐ Check box if you have never received any notices from the bankruptcy court in this case.
- ☐ Check box if the address differs from the address on the envelope sent to you by the court.

THIS SPACE IS FOR COURT USE ONLY

Telephone Number:

Account or other number by which creditor identifies debtor:

KETL

 Check here if ☐ replaces this claim ☐ amends a previously filed claim, dated _____
1. Basis for Claim

- ☒ Goods sold
- ☐ Services performed
- ☐ Money loaned
- ☐ Personal injury/wrongful death
- ☐ Taxes
- ☐ Other _____

- ☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)
- ☐ Wages, salaries, and compensation (fill out below)
- Your SS #: _____
- Unpaid compensation for services performed from _____ to _____
- (date) (date)

2. Date debt was incurred:

from August 2000 thru June 2003

3. If court judgment, date obtained:**4. Total Amount of Claim at Time Case Filed:**

\$ 2872.47

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.

☒ Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.
5. Secured Claim.
☐ Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:

- ☐ Real Estate ☐ Motor Vehicle
- ☐ Other _____

Value of Collateral: \$ _____

 Amount of arrearage and other charges at time case filed
 included in secured claim, if any: \$ _____
6. Unsecured Priority Claim.
☒ Check this box if you have an unsecured priority claim
 Amount entitled to priority \$ _____

Specify the priority of the claim:

- ☐ Wages, salaries, or commissions (up to \$4,650)* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).
- ☐ Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).
- ☐ Up to \$2,100* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).
- ☐ Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7).
- ☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
- ☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____).

*Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

9. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

Date

7-11-03

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

 Nick Ketterling
 OWNER

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

Chapter 12 and 13 claims, along with any supporting must be filed in duplicate.



Quality Tire Service

Highway 24

Phone 436-3900
Rupert, Idaho 83350

Lynn Betterling KETL
100 North 160 West
Rupert Idaho 83350

DATE	TICKET NUMBER	CHARGES	CREDITS	BALANCE
7-99	Pat Forward	1142 84		
3-99	Misc charge	412 59		
25-99	upmt wint	13 00	400 00	1168 43
3-99	53797 wint	45 22		1213 65
2-16-99	upmt wint	8 24	742 84	
6-99	Misc charge	1044 97		1524 02
11-99	54215	99 00		
1-16-99	upmt wint	17 92	500 00	1140 94
2-16-99	upmt wint	11 22	500 00	
2-2-99	54483	25 00		677 16
-19-00	upmt wint	50	500 00	177 66
1-8-00	upmt		177 66	0
3-00	Misc charge	536 86		
10-00	Misc charge	1421 64		
9-25-00	upmt wint	7 93	450 00	1882 55
11-00	Misc charge	1509 67		
1-21-00	upmt wint	25 02	452 98	2964 26
2-26-00	upmt wint	47 50	250 00	2761 76
1-16-01	upmt wint	36 45	679 00	2119 21
2-01	Misc charge	331 31		
2-7-01	upmt wint	25 20	679 00	1796 72
3-12-01	upmt wint	19 56	679 00	

TERMS — Due and Payable 10 days after Receipt of Statement. Your account shall be subject to a Finance Charge if the account or portion thereof is not paid by the 10th of the month following first statement. The Finance charge is a "periodic rate" of 1 1/2% per month or an Annual Percentage Rate of 18%. (Minimum charge of \$1.00 on balances under \$50.00)

PAY LAST AMOUNT IN THIS COLUMN



STATEMENT
DICK AND NICKS
Quality Tire Service

Phone 436-3900
Rupert, Idaho 83350
Highway 24

Lynn Butterham KETL
100 March 100 Credit
Rupert Idaho 83350

DATE	TICKET NUMBER	CHARGES	CREDITS	BALANCE
3-6-01	4158			
4-11-01	upmt wmt	165 00		1302 28
4-01	misc charge	11 39	651 14	
5-9-01	misc charge	597 90		1260 143
5-19-01	upmt wmt	253 50		
6-18-01	upmt wmt	18 56	200 00	1332 49
7-19-01	upmt wmt	18 65	266 58	
1-5-01	5311	10 00		1094 56
1-20-01	5486	448 30		
8-23-01	upmt wmt	15 65	200 00	1358 51
8-30-01	upmt wmt		223 50	1135 01
1-19-01	upmt wmt	347 27		1505 78
10-01	misc charge	22 85	200 00	1328 63
10-3-01	upmt wmt	2282 40		
11-17-01	upmt wmt	19 75	200 00	3430 78
11-29-01	upmt wmt	107 79		
12-21-01	upmt wmt		200 00	3338 57
1-28-02	upmt wmt	54 92	200 00	3193 49
2-02	upmt wmt	52 39	200 00	3045 88
3-4-02	upmt wmt	52 39		3098 27
3-20-02	upmt wmt		200 00	
1-23-02	upmt wmt	41 97	500 00	2440 24
1-23-02	upmt wmt	274 95	500 00	2215 19

TERMS — Due and Payable 10 days after Receipt of Statement. Your account shall be subject to a Finance Charge if the account or portion thereof is not paid by the 10th of the month following first statement. The Finance charge is a "periodic rate" of 1 1/2% per month or an Annual Percentage Rate of 18%. (Minimum charge of \$1.00 at any time.)

PAY LAST AMOUNT IN THIS COLUMN
8273